CS Form No. 212
Revised 2017

PERSONAL DATA SHEET

***WARNING:** Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.*

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes (☐) and use separate sheet if necessary. Indicate N/A if not applicable. **DO NOT ABBREVIATE.** 1. CS ID No. (Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	POSAS		
FIRST NAME	JUBEMARIE	NAME EXTENSION (JR., SR)	N/A
MIDDLE NAME	ESPERANZA		
3. DATE OF BIRTH (mm/dd/yyyy)	04/17/1993	16. CITIZENSHIP	☑ Filipino ☐ Dual Citizenship ☑ by birth ☐ by naturalization
4. PLACE OF BIRTH	BAYBAY LEYTE	If holder of dual citizenship, please indicate the details.	Pls. indicate country: Peru
5. SEX	☐ Male ☑ Female		
6 CIVIL STATUS	☑ Single ☐ Married ☐ Widowed ☐ Separated ☐ Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. SITIO CAABING; Subdivision/Village POMPONAN; City/Municipality BAYBAY; Province LEYTE; ZIP CODE 6521
7. HEIGHT (m)	1.62 m		
8. WEIGHT (kg)	55 kg		
9. BLOOD TYPE	A	18. PERMANENT ADDRESS	House/Block/Lot No. SITIO CAABING; Subdivision/Village POMPONAN; City/Municipality BAYBAY; Province LEYTE; ZIP CODE 6521
10. GSIS ID NO.	N/A		
11. PAG-IBIG ID NO.	121201349538		
12. PHILHEALTH NO.	13-025339539-8		
13. SSS NO.	06-3677409-8	19. TELEPHONE NO.	N/A
14. TIN NO.	474-954-315	20. MOBILE NO.	09384156664
15. AGENCY EMPLOYEE NO.	N/A	21. E-MAIL ADDRESS (if any)	jubemarie.posas@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR)	N/A	N/A
MIDDLE NAME	N/A			
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	POSAS			
FIRST NAME	RENARIO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	PENETRADO			
25. MOTHER'S MAIDEN NAME				
SURNAME	ESPERANZA			
FIRST NAME	JULIETA			
MIDDLE NAME	LLONES		*(Continue on separate sheet if necessary)*	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE From	To	HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
ELEMENTARY	BAYBAY NORTH CENTRAL SCHOOL	PRIMARY EDUCATION	2000	2006	Graduated	2006	
SECONDARY	FRANCISCAN COLLEGE OF THE IMMACULATE CONCEPTION (FCIC)	HIGH SCHOOL	2006	2010	Graduated	2010	
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	
COLLEGE	VISAYAS STATE UNIVERSITY	BACHELOR OF SCIENCE IN NURSING	2010	2011	UNITS EARNED		
		BACHELOR OF SCIENCE IN AGRIBUSINESS	2011	2015	Graduated	2015	
GRADUATE STUDIES	VISAYAS STATE UNIVERSITY	MASTER OF MANAGEMENT - MAJOR IN AGRIBUSINESS MANAGEMENT	2017	2018	40 UNITS		

(Continue on separate sheet if necessary)

SIGNATURE		DATE	4/18/2023

IV. CIVIL SERVICE ELIGIBILITY

27. CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
				NUMBER	Date of Validity
N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience shee

28. INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY / DAILY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0") / INCREMENT	STATUS OF APPOINTMENT	GOV'T SERVICE (Y/ N)
From	To						
01/03/2023	Present	Admin Aide III	Accounting Office, Visayas State University	603.40		JO	Yes
07/31/2015	12/31/2022	Admin Aide I	Accounting Office, Visayas State University	553.40		JO	Yes
06/15/2015	15/07/2015	Clerk	Department of Business & Management, Visayas State	260.00		JO	Yes

(Continue on separate sheet if necessary)

SIGNATURE		DATE	4/18/2023

VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
ISO 9001:2015 Awareness/Re-awareness Seminar	08/31/2022	08/31/2022	8		Visayas State Univerity
Hands-Only Cardiopulmonary Resuscitation	07/21/2022	07/22/2022	16		Department of Health
KAALAM: Creative Forms and Narratives of the Contemporary (Zoom)	03/09/2022	03/09/2022	8		Institute of Human Kinetics, Visayas State Univerity
Webinar RA 11313 Safe Spaces Act	12/10/2020	12/10/2020	3		Visayas State Univerity
Webinar " Seminar on Financial Management"	12/2/2020	12/3/2020	16		VICARP-DOST-PCAARRD Los Baños Laguna
ISO 9001:2015 Awareness/Re-awareness Webinar	11/27/2020	11/27/2020	4		Visayas State Univerity
Orientation Workshop Among IO Clerks & Laboratory Technicians	15/01/2019	15/01/2019	8		Visayas State Univerity
Target Setting Workshop	20/08/2018	21/08/2018	16		Visayas State Univerity
"ISO 9001-2008 Orientation & Writeshop Among Clerk & Secretaries"	15/01/2018	15/01/2018	8		Visayas State Univerity
Marketing Management Seminar	03/19/2017	03/19/2017	8		Department of Business and Management
Leadership Seminar & Team Building	21/02/2016	02/21/2016	8		Immaculate Conception Parish- Gym Baybay
Pre-employment Seminar and Labor Education	04/17/2015	04/17/2015	8		Organized by Department of Labor and Employment
Innovation and Entrepreneurship Forum	03/06/2015	03/06/2015/	8		Sponsored and organized by the Department of Business Management
On the Job Training as Marketing staff	11/11/2014	14/01/2015	300		Salinas Foods Inc. Mandaue City, Cebu

(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
TECHNICAL SKILLS (MICROSOFT OFFICE)	N/A	N/A
INTERPERSONAL SKILLS	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE		DATE	4/18/2023

34. Are you related by consanguinity or affinity to the appointing or recommending chief of bureau or office or to the person who has immediate supervision over you in Bureau or Department where you will be apppointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	☐ YES ☑ NO ☐ YES ☑ NO If YES, give details:
35. a. Have you ever been found guilty of any administrative offense?	☐ YES ☑ NO If YES, give details:
b. Have you been criminally charged before any court?	☐ YES ☑ NO If YES, give details: Date Filed: Status of Case/s:
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	☐ YES ☑ NO If YES, give details:
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	☐ YES ☑ NO If YES, give details: resignation
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)?	☐ YES ☑ NO If YES, give details:
b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	☐ YES ☑ NO If YES, give details:
39. Have you acquired the status of an immigrant or permanent resident of another country?	☐ YES ☑ NO If YES, give details (country):
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a Are you a member of any indigenous group? b Are you a person with disability? c. Are you a solo parent?	☐ YES ☑ NO If YES, please specify: ☐ YES ☑ NO If YES, please specify ID No: ☐ YES ☑ NO If YES, please specify ID No:

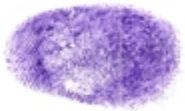
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
NICK FREDDY R. BELLO	Visayas State University	09353256803
NORIETA B. BUSTILLO	Visayas State University	09152329310
WILMA V. NAPIERE	Visayas State University	09359633220

42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.

Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number	
Government Issued ID:	Philhealth
ID/License/Passport No.:	13-025339539-8
Date/Place of Issuance:	BAYBAY CITY

Signature (Sign inside the box)
4/18/2023
Date Accomplished



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SCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated ab

Person Administering Oath